

To : U.S. District Court

From: David DeJesus Sr.

Date: 12-9-06

RE: I Need ~~Help~~ ^{Help} can you send one of the Investigator to see me.

I am writing to you this letter to ask if you could, Please help me get out of this jail. I have a pending law suit on gander Hill and I feel that it is a conflict Interest with me even being here

Here are copy of me asking for help and so you can see, they want to stop me writing, they are copy of Receipts that they are taking to much for all the legal work I made copy. They are doing so much to me, Please send someone to talk to me?

They said they are helping me how? The time they said they seen me was only because there was a Deadline on 9-20-06 they put me down to see someone for a biopsy never came 3 month not a Dr have seen me, on 11-28-06 was a flu shot that's all they done and they said they see me any month its ~~not~~ the truth, how come its now 3 month no one has seen me, I am sick & in pain they are letting me die slowly, and now they want to ~~send~~ send me to a Drug program knowing how sick I am that all I do is sleep, give me help with my Health than I be able to do a drug program. there is a copy of that letter

Appealing the classifications decision but they did not care about any thin I said and a copy of the last grievance case that the Bureau chief deny because they are helping me. If they are helping me how or when because I have not seen it, Please dont let these people keep killing us and get away with it, Thank you
Sincerely David DeJesus Sr.

P.S.

If the Investigator are still coming here tell them to go to 2Y Pod there are alot sick ~~there~~^{people}, with no help. This Jail know what Pod to send the Investigator. Here are some name of Mon's who need help, but can't get none, I am not ^{just} doing this for me but all who need help, also. one us spanish has it worser in here.

Please help, If I pass way dont let these people get away with Killing, that how they are doing to me, and they said they are helping me. If that was truth I would not been filling pain, sicker I dont know who else to ask to Please help me other not to die in here. I'm paying for what I did with time, but these people is taking my life to.

from
David Dejesus Jr

Name of Mon who can't get help, that the Investigator can see How these people are doing us. Dont we have righth?

Cornell Garvin 2-Y-21

ARTHUR STAPLES 2-Y-10

Bryan K. Ayers,
Bryan K. Ayers, 2-Y-25

Michael Leager 2-Y-13

RONALD CORREGER 2-Y-2



STATE OF DELAWARE

DEPARTMENT OF JUSTICE

CARL C. DANBERG

Attorney General



NEW CASTLE COUNTY

Carvel State Building
820 N. French Street
Wilmington, DE 19801
Criminal Division (302) 577-8500
Fax: (302) 577-2496
Civil Division (302) 577-8400
Fax: (302) 577-6630
TTY: (302) 577-5783

KENT COUNTY

102 West Water Street
Dover, DE 19901
Criminal Division (302) 739-4211
Fax: (302) 739-6727
Civil Division (302) 739-7641
Fax: (302) 739-7652
TTY: (302) 739-1545

SUSSEX COUNTY

114 E. Market Street
Georgetown, DE 19947
(302) 856-5352
Fax: (302) 856-5369
TTY: (302) 856-2500

PLEASE REPLY TO:

November 20, 2006

[New Castle County-Civil Division]

The Honorable Joseph J. Farnan, Jr.
United States District Court
District of Delaware
J. Caleb Boggs Federal Building
844 N. King Street
Wilmington, DE 19801

Re: *DeJesus v. Williams, et al.*,
D. Del., C.A. No. 06-209-JJF

Dear Judge Farnan:

Please allow this letter to reflect State Defendant Warden Raphael Williams's waiver of his right to file a Reply Brief in relation to his Motion to Dismiss (D.I. 29). Accordingly, State Defendant Williams rests upon the arguments contained in his Memorandum of Points and Authorities filed in support of the Motion to Dismiss (D.I. 30).

If you have any questions or concerns, please feel free to contact me at (302) 577-8400. Thank you.

Sincerely,

/s/ Erika Y. Tross

Erika Y. Tross
Deputy Attorney General

EYT/vd

cc: David DeJesus, Plaintiff

Briefs, Responses and Replies

1:06-cv-00209-JJF DeJesus v. Williams et al

PaperDocuments

U.S. District Court

District of Delaware

Notice of Electronic Filing

The following transaction was entered on 11/17/2006 at 11:31 AM EST and filed on 11/16/2006

Case Name: DeJesus v. Williams et al

Case Number: 1:06-cv-209

Filer: David DeJesus, Sr

Document Number: 35

Docket Text:

ANSWERING BRIEF in Opposition re [33] MOTION to Dismiss Case as Frivolous *Motion of Defendant, CMS, to Dismiss Plaintiff's Complaint* filed by David DeJesus, Sr.Reply Brief due date per Local Rules is 11/27/2006. (dab)

1:06-cv-209 Notice has been electronically mailed to:

Erika Yvonne Tross Erika.Tross@state.de.us

1:06-cv-209 Notice has been delivered by other means to:

David DeJesus, Sr
Howard R. Young Correctional
P.O. Box 9561
Wilmington, DE 19809

The following document(s) are associated with this transaction:

Document description:Main Document

Original filename:n/a

Electronic document Stamp:

[STAMP dcecfStamp_ID=1079733196 [Date=11/17/2006] [FileNumber=303830-0]
] [b7be972b54d5940fbeb3b0815209f69059894833d1819e49b49fc5e969fac8fc954
330c74e26da86ab29f9a37bc9c6204a8f6bd02c6823791c0f256416214496]]

To: K Grocki. my copy
 From: David DeJesus sr
 Date: 11-21-06
 Re: Indigent letter you wrote

You said that I did not buy writing supply, I guess you did not really look at the receipts that show what I bought, has you can see they took the money that I old for stamps & law libry and you would see that I did got thin that I needed, I got stamp \$9.90 and sm envelope 20¢, 3 soap 80¢ each please you can see that they took the money, I have receipts of the thin they took.

Receivable charge

Receipt # F23107 total collected \$9.90

So can you help me, I need the help, I do not get money like that, when they do send money the business office take to pay all that I use to send mail out.

are you stoping the Indigent so I dont write to the court & Lawsue?

cc The warden

To ACLU

US District court

my Lawyer

STATE OF DELAWARE
DEPARTMENT OF CORRECTIONS
HOWARD R. YOUNG INSTITUTE
P.O.BOX 9279
WILMINGTON, DELAWARE 19809

TO: Dejesus Sr., David (SBI#209513) POD-2Y
FROM: Business Office (K. Grocki)
DATE: 11/21/2006
SUBJECT: Indigent List Denied

COMPLE
NOV 21 2006

You **cannot** be put on the **INDIGENT LIST** due to having a balance of \$10.00.. at the time, the list was being processed. When you had the money, you did not buy the supply for mailing letters. You bought other stuff Instead. I have recopied the receipts to show what you bought.

**DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904**

November 28, 2006

Inmate DEJESUS DAVID S
SBI # 00209513
HRYCI Howard R. Young Correctional Institution
WILMINGTON DE, 19809

Dear DAVID DEJESUS:

We have reviewed your Grievance Case # 24724 dated 03/06/2006.

Based upon the documentation presented for our review, we deny your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

Paul W. Howard
Bureau Chief

**DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904**

November 28, 2006

Inmate DEJESUS DAVID S
SBI # 00209513
HRYCI Howard R. Young Correctional Institution
WILMINGTON DE, 19809

Dear DAVID DEJESUS:

We have reviewed your Grievance Case # 34187 dated 10/25/2005.

Based upon the documentation presented for our review, we deny your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

Paul W. Howard
Bureau Chief

DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904

24

December 4, 2006

Inmate DEJESUS DAVID S
SBI # 00209513
HRYCI Howard R. Young Correctional Institution
WILMINGTON DE, 19809

Dear DAVID DEJESUS:

We have reviewed your Grievance Case # 31826 dated 04/16/2006.

Based upon the documentation presented for our review, we deny your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

Paul W. Howard
Bureau Chief

INACTIVATED INFLUENZA VACCINE

WHAT YOU NEED TO KNOW 2006-07

1 Why get vaccinated?

Influenza ("flu") is a contagious disease.

It is caused by the **influenza virus**, which spreads from person to person through coughing or sneezing.

Other illnesses have the same symptoms and are often mistaken for influenza. But only the influenza virus can cause influenza.

Anyone can get influenza. For most people, it lasts only a few days. It can cause:

- fever
- sore throat
- chills
- fatigue
- cough
- headache
- muscle aches

Some people get much sicker. Influenza can lead to pneumonia and can be dangerous for people with heart or breathing conditions. It can cause high fever and seizures in children. Influenza kills about 36,000 people each year in the United States, mostly among the elderly.

Influenza vaccine can prevent influenza.

2 Inactivated Influenza vaccine

There are two types of influenza vaccine:

An **inactivated** (killed) vaccine, or "flu shot," has been used in the United States for many years. It is given by injection.

A **live**, weakened vaccine was licensed in 2003. It is sprayed into the nostrils. *This vaccine is described in a separate Vaccine Information Statement.*

Influenza viruses are always changing. Therefore, influenza vaccines are updated every year, and an annual vaccination is recommended.

For most people influenza vaccine prevents serious influenza-related illness. It will *not* prevent "influenza-like" illnesses caused by other viruses.

It takes about 2 weeks for protection to develop after the vaccination, and protection can last up to a year.

Inactivated influenza vaccine may be given at the same time as other vaccines, including pneumococcal vaccine.

Some inactivated influenza vaccine contains thimerosal, a preservative that contains mercury. Some people believe thimerosal may be related to developmental problems in children. In 2004 the Institute of Medicine published a report concluding that, based on scientific studies, there is no evidence of such a relationship. If you are concerned about thimerosal, ask your doctor about thimerosal-free influenza vaccine.

3 Who should get inactivated influenza vaccine?

Inactivated influenza vaccine can be given to people 6 months of age and older. It is recommended for **people who are at risk of complications from influenza**, and for **people who can spread influenza to those at high risk** (including all household members):

People at high risk for complications from influenza:

- People **65 years of age and older**.
- Residents of **long-term care facilities** housing persons with chronic medical conditions.
- People who have **long-term health problems** with:
 - heart disease
 - kidney disease
 - lung disease
 - metabolic disease, such as diabetes
 - asthma
 - anemia, and other blood disorders
- People with certain **muscle or nerve disorders** (such as seizure disorders or severe cerebral palsy) that can lead to breathing or swallowing problems.
- People with a **weakened immune system** due to:
 - HIV/AIDS or other diseases affecting the immune system
 - long-term treatment with drugs such as steroids
 - cancer treatment with x-rays or drugs
- People 6 months to 18 years of age on **long-term aspirin treatment** (these people could develop Reye Syndrome if they got influenza).
- Women who will be **pregnant** during influenza season.
- **All children 6-59 months of age.**

People who can spread influenza to those at high risk:

- **Household contacts and out-of-home caretakers** of children from 0-59 months of age.
- Physicians, nurses, family members, or anyone else in **close contact with people at risk** of serious influenza.

Influenza vaccine is also recommended for adults 50-64 years of age and anyone else who wants to **reduce their chance of getting influenza**.

A yearly influenza vaccination should be *considered* for:

- People who provide **essential community services**.
- People living in **dormitories** or under other crowded conditions, to prevent outbreaks.
- People at high risk of influenza complications who **travel** to the Southern hemisphere between April and September, or to the tropics or in organized tourist groups at any time.

4

When should I get influenza vaccine?

The best time to get influenza vaccine is in **October** or **November**.

Influenza season usually peaks in February, but it can peak any time from November through May. So getting the vaccine in December, or even later, can be beneficial in most years.

Some people should get their flu shot in **October** or earlier:

- people **50 years of age and older**,
- younger people at **high risk** from influenza and its complications (including **children 6 through 59 months of age**),
- **household contacts** of people at high risk,
- **health care workers**, and
- **children younger than 9 years of age** getting influenza vaccine for the first time.

Most people need one flu shot each year. **Children younger than 9 years of age getting influenza vaccine for the first time** should get 2 doses, given at least one month apart.

5

Some people should talk with a doctor before getting influenza vaccine

Some people should not get inactivated influenza vaccine or should wait before getting it.

- Tell your doctor if you have any **severe** (life-threatening) allergies. Allergic reactions to influenza vaccine are rare.
 - Influenza vaccine virus is grown in eggs. People with a severe egg allergy should not get the vaccine.
 - A severe allergy to any vaccine component is also a reason to not get the vaccine.
 - If you have had a severe reaction after a previous dose of influenza vaccine, tell your doctor.
- Tell your doctor if you ever had Guillain-Barré Syndrome (a severe paralytic illness, also called GBS). You may be able to get the vaccine, but your doctor should help you make the decision.
- People who are moderately or severely ill should usually wait until they recover before getting flu vaccine. If you are ill, talk to your doctor or nurse about whether to reschedule the vaccination. People with a **mild illness** can usually get the vaccine.

6

What are the risks from inactivated influenza vaccine?

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of a vaccine causing serious harm, or death, is extremely small.

Serious problems from influenza vaccine are very rare. The viruses in inactivated influenza vaccine have been killed, so you cannot get influenza from the vaccine.

Mild problems:

- soreness, redness, or swelling where the shot was given
- fever • aches

Vaccine Information Statement
Inactivated Influenza Vaccine (6/30/06) 42 U.S.C. §300aa-26

If these problems occur, they usually begin soon after the shot and last 1-2 days.

Severe problems:

- Life-threatening allergic reactions from vaccines are very rare. If they do occur, it is within a few minutes to a few hours after the shot.
- In 1976, a certain type of influenza (swine flu) vaccine was associated with Guillain-Barré Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS. However, if there is a risk of GBS from current flu vaccines, it would be no more than 1 or 2 cases per million people vaccinated. This is much lower than the risk of severe influenza, which can be prevented by vaccination.

7

What if there is a severe reaction?**What should I look for?**

- Any unusual condition, such as a high fever or behavior changes. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- Call a doctor, or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not provide medical advice.

8

The National Vaccine Injury Compensation Program

In the event that you or your child has a serious reaction to a vaccine, a federal program has been created to help pay for the care of those who have been harmed.

For details about the National Vaccine Injury Compensation Program, call 1-800-338-2382 or visit their website at www.hrsa.gov/vaccinecompensation.

9

How can I learn more?

- Ask your immunization provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO)
 - Visit CDC's website at www.cdc.gov/flu



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR IMMUNIZATION AND RESPIRATORY DISEASES

***** RESIDENT COPY *****

Receivable Charge Receipt # J6995

HRYCI
11/22/2006 12:56:34
ST 010 / OPR BSP

DEJESUS,

DAVID

SBI : 209513
Date of Birth : 05/11/1969
Location : 2Y

Legal Supplies -	Old Bal :	\$0.00
	Charged :	+ \$9.00
	Collected :	- \$9.00
	New Bal :	\$0.00

Comment : 11/14/06 copy fee

Legal Supplies -	Old Bal :	\$0.00
	Charged :	+ \$3.00
	Collected :	- \$3.00
	New Bal :	\$0.00

Comment : 10/26/06 mail supply fee, copy fee

Legal Supplies -	Old Bal :	\$0.00
	Charged :	+ \$2.50
	Collected :	- \$2.50
	New Bal :	\$0.00

Comment : 11/17/06 copy fee

Total Collected :	\$14.50
-------------------	---------

Debt Balance :	\$0.00
Commissary Balance :	\$0.30

***** RESIDENT COPY *****

Receivable Charge Receipt # J6994

HRYCI
11/22/2006 12:50:50
ST 010 / OPR BSP

DEJESUS,

DAVID

SBI : 209513
Date of Birth : 05/11/1969
Location : 2Y

Legal Supplies -	Old Bal :	\$0.00
	Charged :	+ \$5.40
	Collected :	- \$5.40
	New Bal :	\$0.00

Comment : 11/20/06 mail supply fee, copy fee

Total Collected :	\$5.40
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Debt Balance :	\$0.00
Commissary Balance :	\$14.80

Request for Legal Photocopies

NOTE: You will receive your copies within a reasonable amount of time. Please read this form and fill it out completely and correctly. PRINT ONLY.

Name: David Dejesus

Date: 11/13/06

Housing Unit: 24#12

Type of Document(s) (Max of five)

Legal Letter 5 pg X
Envelopes
Motion

Numbers of
Copies

3
3
1

Envelopes Needed

11.25
15
11.90
1.00
12.40
 White:
 Yellow:

I have a deadline, my pleadings must be in court by:

Stapled Double Sided (Will be verified) Date: _____ Case#: _____

Your request can not be honored for the following reasons:

- | | |
|---|--|
| <input type="checkbox"/> The material submitted is not legal work. | <input type="checkbox"/> The citation you have submitted is incomplete. |
| <input type="checkbox"/> Grievances, letters, status sheets, etc. are not legal work. | <input type="checkbox"/> There is a .25 per page per side charge for your item(s) submitted for copying. |
| <input type="checkbox"/> Your request is excessive, five (5) case per week maximum. | |
| We do not have the material you have requested. | |

To: Classifications
 From: David DeJesus sr
 Date: 11-22-06
 RE: Appealing Classifications decision

There are Two reason for my appealing this matter for one I believe that theres a conflict of Interest with me even being here due to the fact that I have a law suit in progress with the medical staff of this place because of lack of medical attention for my severe medical condition. I have Hepititus C, to the point that I have an infection in my liver so bad that most of the time I can't even get out of the ~~bed~~, because of the pain and thats my second reason. I sincerely and respectfully ask that you reconsider My current classification and consider it possable to send me to sussex, one other reason is that I have co Defends in the Key program and in this Jail and DCC I did let the counselor and other with name. Thank you for your time and consideration.

Sincerely

David DeJesus Jr

cc

us D count

warden

AGLU

my self

TO: DeJesus, David S.

SBI: 209513

FROM: I.B.C.C.

Housing Unit: 2y 1C

DATE: December 5, 2006

RE: CLASSIFICATION

Your M.D.T. has recommended you for the following:

Medium continue; Academics continue; Greentree, DCC rescind; KEY(N

The I.B.C.C. decision is to:

☐ Recommend Approve

☐ Not Recommend Approve

☐ Defer

☒ Approve

☐ Not Approve

☐ No Action

Reason:

- | | |
|--|--|
| <input type="checkbox"/> Lack of Program Participation | <input type="checkbox"/> Time remaining on sentence |
| <input type="checkbox"/> Pending adjustment boards | <input type="checkbox"/> Prior failure under supervision |
| <input type="checkbox"/> Gradual phasing indicated | <input type="checkbox"/> Poor Institutional Adjustment |
| <input type="checkbox"/> Open Charges | <input type="checkbox"/> Serious Nature of Offense |
| <input type="checkbox"/> Program Does not meet your needs | <input type="checkbox"/> Prior Criminal History |
| <input type="checkbox"/> Lack of Evidence that you have Addressed your problem in a serious manner | |
| <input type="checkbox"/> Failure to address treatment issues in relation to your Offense | |
| <input type="checkbox"/> You present a current and continuous danger to the safety of staff, inmates, the good order of the Institution. | |
| <input type="checkbox"/> Other: | |

Review Date: _____
ADDITIONAL COMMENTS:

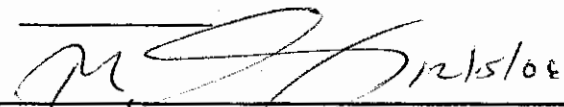
APPROVED

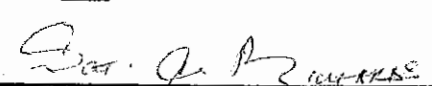
- | | |
|--------------------------|-------------|
| <input type="checkbox"/> | LIFE SKILLS |
| <input type="checkbox"/> | NEW VISIONS |
| <input type="checkbox"/> | P.R.C. |
| <input type="checkbox"/> | WORK POOL |
| <input type="checkbox"/> | CIVIGENICS |
| <input type="checkbox"/> | ACADEMICS |

- | | |
|--------------------------|-------------------|
| <input type="checkbox"/> | MAXIMUM |
| <input type="checkbox"/> | MEDIUM |
| <input type="checkbox"/> | MINIMUM |
| <input type="checkbox"/> | COMMUNITY/MINIMUM |

RECOMMENDED

- | | |
|--------------------------|----------------|
| <input type="checkbox"/> | DCC |
| <input type="checkbox"/> | MCI |
| <input type="checkbox"/> | SCI |
| <input type="checkbox"/> | WEBB |
| <input type="checkbox"/> | WR |
| <input type="checkbox"/> | CREST |
| <input type="checkbox"/> | DUI |


Warden's Signature/Designee


I.B.C.C. Chairperson Signature

David De Jesus Sr

289513
PO Box 958

WILMINGTON, DE 19850 DEC

DEC 11 2006 11:18 PM



U.S.M.S.
X-RAY

US District Court # 06-209-JJF
844 N King St
Lock Box 18
Wilmington DE 19801

LEGAL MAIL ONLY